2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007515

Entity Name: KR2, LLC

FILED May 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5900 N. ANDREWS AVE. 5900 N. ANDREWS AVE.

#111 #905

FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

5900 N. ANDREWS AVE. 5900 N. ANDREWS AVE.

#111 #905

FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309

FEI Number: 03-0403384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RICKERT, KEN RICKERT, KEN

5900 N. ANDREWS AVE. 5900 N. ANDREWS AVE.

SUITE 111 SUITE 905

FORT LAUDERDALE, FL 33309 US FORT LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KEN RICKERT 05/03/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

 Title:
 MGRP () Delete
 Title:
 MGR (X) Change () Addition

 Name:
 RICKERT, KEN
 Name:
 RICKERT, KEN

 Address:
 5900 N. ANDREWS AVE., STE 111
 Address:
 5900 N. ANDREWS AVE., STE 905

Address: 5900 N. ANDREWS AVE., STE 111 Address: 5900 N. ANDREWS AVE., STE 9
City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEN RICKERT MGR 05/03/2004